SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN

Date Stamp (Received) **3**

Refund: 2000 F

Owner(s):(If there are Multiple	Secretaria Standard and the application of the application of the amount of the application of the second of the application of	11 }~		Rec'd for Issuanc		☐ Municipal Use			Commercial Use	gen.		Residential Use			Proposed Use		Proposed Construction:	Sylicting Structure: H						X	Value at Time of Completion * include donated time &	Non-Shoreland		□ Shoreland → □		Section (S	SW 14, NW	PROJECT Le	GREGI	Authorized Agent: (Person	Contractor:	9 4.558	of Property	Owner's Name:	TYPE OF PERMIT REQUESTED	INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department. DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.	(114)
wner(s):(Land is Culture) where sign or letter(s) of authorization must accompany this application)	FAILURE TO Retain functions any accompan redetain functions any accompan redetail and accuracy of all informations relying on this information repairs any reasonable tippe for the put	Other: (explain)			+	$\dot{+}$	-	- Bunkhou		100				Residence	1000000		on:	STOPPING applied to	REMOVE EXIST	Property	Relocate (existing bldg)	Conversion	☐ Addition/Alteration	New Construction	Project		If yescontinue	Is Property/Land within 300 feet of River, Creek or Landward side of Floodplain?		, Township SD N	N 1/4 Gov't Lot	Legal Description: (Use T	ANGELEN	Signing Appl	1 4 hours	127	IKVCKIK,		ESTED—▶ ☐ LAND	vill be issued until all fees a Bayfield County Zoning Dep DN UNTIL ALL PERMITS HAV	
ed All Owners must sign or	OBTAIN A PERMIT or STA ying information) has been ex- nation I (we) am (are) providing tion I (we) am (are) providing rpose of inspection.	xplain)	Conditional Use: (explain)	Special Use: (explain)	₽	Accessory Building (specify)	Addition/Alteration (specify)	Mobile Hame (manufactured date)	with Attached Garage	with (2 nd) Deck	with a Deck	with a Porch	with Loft	Residence (i.e. cabin, hunting shack, etc.)	Structure /first stru		C. C. C. C. C. C.	or is relevant to it.	4 1		☐ Basement	1	☐ 1-Story + Loft	√1-Story	# of Stories and/or basement		Food feet of raise, to	f Floodplain?		N, Range O4 W	Lot(s)	atement)	O I		AND F-10 Cont		l GW る		LAND USE SANITARY	re paid. partment. E BEEN ISSUED TO APPLK	
or letter(s) of authoriza	ARTING CONSTRUCTION I amined by me (us) and to the amined that it will be relied ug in or with this application. I	144/V	THE CONTRACTOR OF THE CONTRACT	, the state of the	Alteration (specify)			leeping quarters,	arage					shack, etc.)	Proposed Structure		Length: 90	Length:					Year Round	□ Seasonal	Use		If yescontinue	If yes continue		Town of:	CSM Vol & Page	6-2-50-	(73 digital	Agent Phone: Ag		TIT	City/State/Zip:	Address:	PRIVY		E C
tion must accompan	WITHOUT A PERMIT W best of my (our) knowled son by Bayfield County in (we) consent to county o	14444-	MATERIAL STATES OF THE STATES		- Administration	and the second s	A PER	or □ cooking & roc	-						e		W	Š		_	X None)	2		# of bedrooms	-		Distance Suucture	TUCK		Lot(s) No.	04-15-2-03-	THE PARTY OF THE P	ent Mailing Address	Plumber: '	S WI	1	City/State/Zip	CONDITIONALUS		
y this application)	FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES FAILURE TO OBTAIN A PERMIT OF THE PERMI					(9)		& 1000 bleb leculties) ((-		Width: 50	Width:	None	Compost Toilet	Portable (w/serv	Sanitary (Exists)	(New) Sanitary	Municipal/City	What Ty Sewer/Sanita Is on the p		feet	feet		Lot Size	Błock(s) No. Subdivision:	Volu	Recorder	Agent Mailing Address (include City/State/Zip):	-	H1875 1	カギーカウン	,	SPECIALU	Keruno:	
Date 3 - 1/-	nd complete. I (we) acknowle permit. I (we) further accept ng county ordinances to have	×		×	×	90 x 30 1	×)	×	×	×	×	××	×	× :	Vimensions	7	Height:	Height:		1	Vauited (min 200 gallon) e contract)	Specify Type:	Specify Type:	The state of the s	t Type of nitary System e property?		XNO	ls Property in _ Floodplain Zone? _] Yes		Acreage	-	me 778 Page(s) 649	Document: (i.e. Proper	Written Authorization Attached	Plumber Phone:		Cell Phone:		O.A		3-18-14
-14	dge that I (we) Ilability which access to the		mittal			as 1						and the state of t			Footage	Square	8		***************************************			<u> </u>	- Twell	☐ City	Water		XVo	Are Wetlands Present? ☐ Yes				649	No tv Ownership)	thorization	ione:			200	馬		

Authorized Agent:

(If you are signing on behalf of the owner(s) a letter of authorization

must accompany this application)

Attach
Copy of Tax Statement
If you recently purchased the property send your Recorded Deed

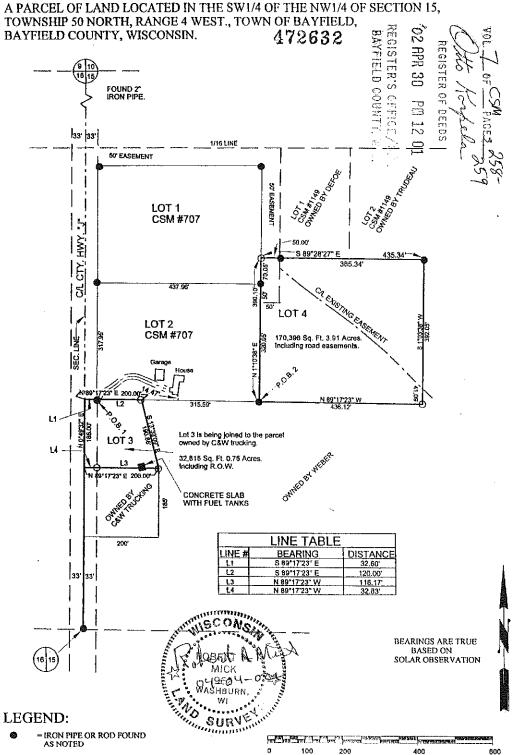
Date

Address to send permit

war Sketch your Property (regardless of what you are applying for)

BAYFIELD COUNTY CERTIFIED SURVEY MAP # //92

SHEET 1 OF 2



= 3/4"X24" IRON RE-BAR WEIGHING 1.63 LBS./LIN.FT. SET THIS SURVEY 0

= RECORDED AS.

DATE: DECEMBER 17, 2001

SUPERIOR SURVEYS, INC. 78215 STATE HIGHWAY 13 WASHBURN, WISCONSIN R.A. MICK R.L.S. 962